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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09985,699	11/05/2001	Mark Pepys	P 0284057 206002/JND	4029

TITLE OF INVENTION: THERAPEUTIC AGENT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	01/17/2006
EXAMINER		ART UNIT	CLASS-SUBCLASS		
MELLER, MICHAEL V		1655	514-002000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list:
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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1 Pillsbury Winthrop Shaw Pittman LLP
 2 _____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Pentraxin Therapeutics Limited

London ENGLAND

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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Issue Fee
 Publication Fee (No small entity discount permitted)
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A check in the amount of the fee(s) is enclosed.
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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 03-3475 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Thomas A. Cawley, Jr., Ph.D.Date January 17, 2006Typed or printed name Thomas A. Cawley, Jr., Ph.D.Registration No. 40,944

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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703-905-2500

T-604 P.001/002 F-369

Attorney's Docket 068300-0284057

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re PATENT APPLICATION of:
MARK B PEPYS

Confirmation No: 4029

Application No.: 09/985,699

Group Art Unit: 1655

Filed: November 5, 2001

Examiner: Michael V. MELLER

Title: THERAPEUTIC AGENT

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Commissioner for Patents
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**CERTIFICATION OF FACSIMILE TRANSMISSION
UNDER 37 C.F.R. §1.8**

I hereby certify that the following papers, consisting of two pages including this cover sheet, are being facsimile transmitted to the Patent and Trademark Office at (703) 273-2885 on the date shown below:

Issue Fee Transmittal and Issue Fee

PILLSBURY WINTHROP SHAW PITTMAN LLP

THOMAS A. CAWLEY, JR., PH.D.
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(Certification of Facsimile Transmission—page 1)

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